



**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
INSPECTION REPORT FOR LPG
UNDERGROUND STORAGE WELLS**

WELL IDENTIFICATION

Type of inspection:					
Date of inspection:			Time of inspection:		
Well No.			Permit No.		
$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$	Section	Township	S Range W County
Company:				Facility:	

INSPECTION INFORMATION

Status of well: New Existing			
Total depth of well below ground surface (bgs):			
Static groundwater level:			
Casing diameters and depths:	Casing	Diameter	Depth
	Surface:		
	Intermediate:		
	Production:		
Pressures:	Brine (psig):		
	Annulus (psig):		
Field Activity (well installation, workover, testing, logging): 			
Condition of wellhead and associated lines, tanks, meters, gauges, warning and detection systems, etc) 			

Comments

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Personnel Met During Inspection

Name:	Company:	Title:

Signature of Inspector:

Title:

Date: